



DIFP

Department of Insurance, Financial Institutions & Professional Registration

JOB OPENING

TITLE: Market Conduct Examiner II/III (Life & Health)

LOCATION: Market Conduct Section, Insurance Market Regulation Division
Jefferson City or St. Louis, Missouri Domicile

SALARY: \$40,000 to \$71,893 (Salary will be commensurate with relevant qualifications, experience and insurance designations)

SCREENING DATE: Screening to begin on October 28, 2013

DEFINITION:

This is advanced level professional work in the Missouri Department of Insurance, Financial Institutions & Professional Registration (DIFP) in the examination and evaluation of insurance companies and their dealings with policy holders and claimants or health care service providers to ensure compliance with statutes and regulations relating to market conduct practices. The examinations are conducted at DIFP offices or when necessary at the insurer's offices which are located throughout the United States.

An employee in this position participates in or conducts examinations of insurance companies, health services corporations, health maintenance organizations, third party administrators and utilization review firms. Field examinations and desk audits are conducted to determine compliance with state statutes and regulations regarding items such as claims practices, underwriting, sales and advertising, insurance rates, policy provisions, and complaint handling. In addition, the employee also has responsibility for drafting major sections or in some cases the entire examination report. An employee in this class/position is expected to complete assigned tasks with little or no supervision and may run smaller and less complex examinations alone. Work is reviewed at the completion of the examination by the Legal Counsel, Audit Manager or Chief Market Conduct Examiner.

EXAMPLES OF WORK PERFORMED: (Duties and responsibilities may be added, deleted, or changed at any time at the discretion of management, formally or informally, either verbally or in writing.)

Participates in all phases of market conduct examinations as part of a team or alone, reviewing such items as claims practices, underwriting, sales and advertising, insurance rates, policy provisions, and complaint handling for compliance with laws, regulations, and generally accepted practices. Applies proper sampling methods to acquire a random credible sample for review; reconciles data/files received with sample requested. Reviews company files/data for ambiguities or inconsistencies noting exceptions and possible violations in files/data reviewed. Develops an analysis of findings for review by the Examiner-in-Charge. Evaluates the application of terms of policy contracts for fairness and equity. Develops an overall plan of examination if requested. Assists Examiner-in-Charge or prepares final report.

EXAMPLES OF REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES:

Considerable knowledge of regulatory laws, regulations, and generally accepted practices pertaining to insurance companies and the ability to understand and apply these to specific situations in insurance company examinations. Considerable knowledge of the principles of sales, advertising, underwriting, rating, claims, accounting or similar services of an insurance company. Considerable knowledge of acceptable and unacceptable marketing practices in this state. Considerable knowledge of general contract provisions of common policy types. Considerable knowledge of insurance company operations and standard industry practices. Considerable knowledge of details and legal interpretations of licensing issues. Ability to investigate, analyze and make complete and accurate examinations. Ability to write clear, concise and informative reports. Ability to manually rate policies, calculate premium refunds, and calculate non-forfeiture values. Ability to discover ambiguities or inconsistencies in rate plans or field rate manuals. Ability to question established modes of operation where inconsistent with standards. Proficiency with software packages including database, spreadsheet, word processing and communications software. Ability to communicate and work effectively with company officials, examiners from other states and staff of the department.

EXPERIENCE AND TRAINING QUALIFICATIONS: (The following statement represents the minimum experience and training standards required. Equivalent substitution will be permitted in case of deficiencies in either experience or education.)

Three years (Examiner II) or six years (Examiner III) of professional experience in insurance or health care in one or more of the "Areas of Qualifying Experience" listed below and graduation from an accredited four-year college or university.

Possession of the FLMI, CLU, ALHC, or similar professional insurance designations or licensure as an LPN, RN, or attorney may be substituted for qualifying experience.

Qualifying experience in the following areas in excess of the minimum experience noted above may be substituted on a year-for-year basis for deficiencies in the required education.

AREAS OF QUALIFYING EXPERIENCE:

1. professional experience in insurance underwriting, rating, claims administration, contract development, product development, or adjusting.
2. professional experience in insurance accounting.
3. professional experience in actuarial analysis or statistical research methods.
4. professional experience in insurance regulation, health care or insurance law.
5. professional experience in insurance computer applications.

SEND COMPLETED APPLICATION FORM, RESUME AND COPY OF COLLEGE TRANSCRIPTS TO:

**DIFP – Human Resources
Attn: Market Conduct Examiner (L&H)
P. O. Box 690
Jefferson City, MO 65102**

EOE: F/M/V/D